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| **Please speak to your Community Engagement Officer before completing this form**Officer’s contact details can be found here:[www.testvalley.gov.uk/ceofficers](http://www.testvalley.gov.uk/ceofficers)  |

1. **Please enter the details of your organisation / group**

|  |  |
| --- | --- |
| Organisation / group name: |  |
| Type of organisation / group:*E.g. Charitable Incorporated Organisation, Parish Council*  |  |
| Registered Charity Number:(If applicable)  |  |

1. **Please enter details of the main contact for this application**

|  |  |
| --- | --- |
| Contact name: |  |
| Position held in organisation / group: |  |
| Telephone numbers:  | Mobile: |
| Landline: |
| Email address:(be clear if case sensitive) |  |
| Postal address:  |  |
| Date spoken to TVBC Community Engagement Officer: |  |

1. **What is the name of the project?**

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|  |

1. **What is the duration of the project?**

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1. **Please provide a description of your project**

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1. **Does your project involve working in partnership with another organisation(s)?**

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| --- |
| *Delete where applicable:*Yes / No |
| **If you answered ‘Yes’ to question 4 please provide details:** |

1. **Please describe who will benefit from the project and how?** *Please include the approximate number of beneficiaries*

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1. **Please provide a description of what you require the grant for, with a breakdown of approximate costs for each element.** *Please add more lines if necessary*

|  |  |
| --- | --- |
| **Items** | **Costs** |
|  |  |
|  |  |
|  |  |
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|  |  |
|  |  |
|  |  |
| **Total project cost:**  |  |
| **Total amount being applied for:** |  |

|  |  |
| --- | --- |
| 1. **Which ward(s) is the project in?**

*If unsure, please ask the Community Engagement Officer* |  |
| 1. **Are you aware of any organisations that provide the same or similar services in this area?**
 | *Delete where applicable:*Yes / No |
| 1. **If you answered ‘Yes’ to question 10 please explain how you will link with them to avoid duplication and to maximise the impact of the grant?**
 |  |

1. **Please list any supporting documents you are including in your application, such as a constitution**

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1. **Declaration**

I declare that to the best of my knowledge, the information I have provided on this application form is correct and the grant will be used for the purpose stated on this form.  I understand that if I have knowingly provided a false statement, this application will be void and I may be subject to prosecution.

By putting your name on this application form you are confirming that you have read, understood and agree to the terms and conditions of this grant.

|  |  |
| --- | --- |
| **Signed:** |  |
| **Print name:**  |  |
| **Date:**  |  |

1. **Bank details**

|  |  |
| --- | --- |
| **Name of account:** |  |
| **Name of bank:** |  |
| **Sort code:** |  |
| **Account number:** |  |

1. **Submission**

Please e-mail this completed form to your Community Engagement Officer using the contact details available here [www.testvalley.gov.uk/ceofficers](http://www.testvalley.gov.uk/ceofficers)

If you are unable to return this form via e-mail, please discuss this with your Community Engagement Officer who can help you with your application submission.

**Test Valley Borough Council – Cost of Living Support Hub**

For more information, including external funding opportunities, please visit the Test Valley Borough Council **Cost of Living Support Hub**: [www.testvalley.gov.uk/CostOfLivingSupport](http://www.testvalley.gov.uk/CostOfLivingSupport)